

February 9, 2015

Dear Rep. Abercrombie, Sen. Moore and other Human Services Committee Members-

I'm writing to give testimony regarding proposed Bill Number 6155, a bill intended to improve access to information of Medicaid waiver applications. I have been a provider on the Acquired Brain Injury (ABI) Waiver since 2010, specifically an Independent Living Skills Trainer (ILST) for a woman who suffered significant memory deficits after an anoxic brain injury. In my role as an ILST, I have been able to assist my client in her goal to live as independently as possible and remain engaged in her community. On January 1<sup>st</sup> of this year, the Department of Social Services (DSS) changed my position from being a self-employed one to being an employee of my client. Neither my client nor I were consulted about this change before it was made. I believe this change was not in the best interest of my client or of myself as a provider and I think a more transparent process would have benefitted everyone.

Since this change took place, my client has been without ILST services. DSS' decision to make my client the employer of her ILSTs made her responsible for any workmen's compensation claims against her. Her conservator tried unsuccessfully to obtain workmen's compensation insurance for her. As a result, she understandably decided the risk of being an employer without workman's compensation insurance was too high. Even if she had been able to obtain the insurance, the cost would likely have been prohibitively high since my client's only income is from SSDI and SNAP benefits. How is it that DSS made this change without a plan for how clients are supposed to handle the liability being given to them regarding workmen's compensation claims?

From my viewpoint as a provider, the change creates a dangerous situation for all involved. ILSTs are meant to give direction to their brain-injured clients under the direction of the client's behavioral cognitive provider. By making the client the employer, it is unclear who is meant to give direction to whom. As employees, are ILSTs supposed to take direction from their brain-injured clients? The program is set up for ILSTs to give the direction, not take direction (the T stands for Trainer). What if their brain-injured client directs them to do something they believe to be ill advised? Are they supposed to do it or risk being fired by the client? What is the role of the behavioral cognitive provider in the equation? All of these questions should have been answered before DSS made this change and I believe they would have been if the providers and clients had been in the loop about the proposed change.

I urge you to pass this bill. Involving the participants in the Medicaid Waivers earlier in the decision-making process will benefit everyone since clients and providers have important information to add to the discussion.

Sincerely,  
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